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CONFIRMATION NO. 3550

<b>SERIAL NUMBER</b> 10/731,337	<b>FILING OR 371(c) DATE</b> 12/09/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 7175-74032
<b>APPLICANTS</b> Joseph A. Costanzo, Federal Way, WA;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/955,850 09/19/2001 PAT 6,659,935 which claims benefit of 60/234,443 09/21/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/09/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY WA	SHEETS DRAWING 13	TOTAL CLAIMS 17
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
<b>ADDRESS</b> 03000				
<b>TITLE</b> LIFTING APPARATUS FOR PATIENT SUPPORT SURFACE				
<b>FILING FEE RECEIVED</b> 1070	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	